

REQUEST FOR TRANSFERS OR REVISIONS IN LSTA PROJECT BUDGETS

FFY 2005 PROGRAM FUNDS

LIBRARY SERVICES AND TECHNOLOGY ACT – PL 108-81, AS AMENDED

Complete and return 2 copies of this form to the S.C. State Library, ATTN: Guynell Williams, Deputy Director/LSTA Coordinator, P.O. Box 11469, Columbia, S.C. 29211. An approval copy will be returned for your files.

Sub-grantee (*organization*) name

Print Name and Title of Requester

LSTA Sub-grant Award Number (*See Official Award Notice*)

Current Date

| BUDGET AS APPROVED : _____ <div style="text-align: right; padding-right: 20px;">(date)</div> | REQUEST FOR TRANSFER OF | ADJUSTED BUDGET AFTER TRANSFERS |
|--|---|--|
| Personal Services \$ _____ | \$ _____ from Personal Services to _____ | Personal Services \$ _____ |
| Library Materials \$ _____ | \$ _____ from Library Materials to _____ | Library Materials \$ _____ |
| Equipment \$ _____ | \$ _____ from Equipment to _____ | Equipment \$ _____ |
| Other \$ _____ | \$ _____ from Other to _____ | Other \$ _____ |
| GRAND TOTAL \$ _____ | | GRAND TOTAL \$ _____ |

Prior approval is required when a single change or the dollar amount of a number of cumulative changes exceeds 25% of the grant award.

Signature of Person Making Request

FOR SCSL USE ONLY:
 Date of Approval by S.C. State Library: _____ Signature of Approval: _____
LSTA Coordinator or SCSL Director only